



DEPARTMENT OF THE NAVY
NAVY ENVIRONMENTAL HEALTH CENTER
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NAVENVIRHLTHCENINST 6260.2
OEM 19 JUN 2001

NAVENVIRHLTHCEN INSTRUCTION 6260.2

Subj: MEDICAL MATRIX COMMITTEE

Ref: (a) OPNAVINST 5100.19 Series
(b) OPNAVINST 5100.23 Series
(c) BUMEDINST 5450.157

1. Purpose. To recognize the Medical Matrix Committee, provide guidance and procedures, and assign responsibilities. This is a new instruction and should be read in its entirety.

2. Scope. This instruction applies to the corporate Navy Environmental Health Center (NAVENVIRHLTHCEN).

3. Background. References (a) through (c) assign responsibilities to the NAVENVIRHLTHCEN for providing technical oversight of the medical surveillance and certification processes related to Occupational and Environmental Medicine (OEM). These responsibilities were managed by an informal group called the Medical Matrix Committee, which was comprised of physicians and nurses considered experts in the field of occupational medicine within the Navy. As such, the committee was a valuable resource for providing guidance on occupational medicine programs, as well as evaluating and monitoring those programs to ensure they employ evidence-based medicine principles. That group constituted an internal peer review panel for Navy occupational and environmental medicine and now warrants official recognition. In addition, representatives from the US Army and US Air Force Surgeons General have expressed interest in committee participation to improve standardization of evaluations across the services.

4. Organization and Management

a. The Medical Matrix Committee shall have a chairperson and 7 members (4 physicians, 4 nurses total) from Navy Medicine. Members shall be current employees of Navy Medicine, either active duty or civilian, and serve voluntarily in addition to other duties. Members should reflect the diversity of Navy occupational and environmental medicine, with an emphasis on relevance and functionality in the clinic setting. Members shall be appointed for two-year terms, and may be reappointed at the discretion of the Commanding Officer. The chairman may solicit additional representatives on topics due to expertise and interests.

b. In addition, one representative each from the Surgeon General of the US Air Force and Surgeon General of US Army will be invited to participate on the committee. These

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representatives will allow for inputs from outside the US Navy since many of the surveillance programs and certification examinations extend across the Department of Defense.

c. Physician members shall be board certified and/or residency trained in occupational medicine or preventive medicine. Nurse members shall be certified occupational health nurses or equivalent. The OEM directorate shall provide an executive secretary for the committee and have at least one member on the committee.

d. The chairman shall be designated by the Commanding Officer (CO) of the NAVENVIRHLTHCEN, with inputs from the committee. Members shall be appointed by CO, NAVENVIRHLTHCEN based on the recommendation of the chairman.

e. The committee shall meet as needed and may meet informally via electronic means. Brief minutes shall be maintained, and actions summarized in an annual report to the CO, NAVENVIRHLTHCEN.

5. Responsibilities

a. CO, NAVENVIRHLTHCEN shall:

(1) Appoint chairperson and members.

(2) Review recommendations of the Medical Matrix Committee.

b. Chairperson, Medical Matrix Committee shall:

(1) Nominate membership for the Medical Matrix Committee

(2) Oversee activities of the Medical Matrix Committee.

c. Medical Matrix Committee members shall:

(1) Develop, review and recommend criteria for medical surveillance and certification examinations, based on group consensus. The goal should be to review the entire medical matrix every two years, with an emphasis on high volume, high visibility or problem prone areas as identified by the committee. Updates for the PC Matrix computer program to reflect those criteria are part of this responsibility.

(2) Provide ongoing assessment of aggregate population data to identify trends and epidemiological assessment of injury and illness data to focus prevention efforts.

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(3) Provide, on request, consultative reviews for other occupational medicine assessments related to matrix issues, either by the committee or subgroups.



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List V (All NAVENVIRHTLHCEN Personnel)